

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LM		08-22-01
O.I.P.E. CLASSIFIER		10	8-29-01
FORMALITY REVIEW	MM	920	09-20-01
RESPONSE FORMALITY REVIEW	gph	1020	11-2-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	06 11 02
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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530  
09-20-01  
67  
11-2-01